Revised 08/08

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A DES MOINES, IA 50319 Fax: (515)281-4073 www.lowa.gov/ethics



lowa Code section 6.7 requires all gifts and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

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Gift or Bequest Information red by a department or accepted to Governor on behalf of the state	v the
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FORM-GB

DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

State Public Defender's Office		20	
Name of Department or Office 321 E. 12th Street, 4th Floor Lucas State Office Building	Des Moines. IA 50319-0087	Ξ	
Mailing Address (515) 242-6158	City, State, Zip Code		
Area Code & Telephone No.		2	-6
CONTACT PERSON FOR RECIPIENT DEPARTMEN	T OR OFFICE:		1.7
Samuel P. Langholz		PH	1
Name		:2	
Mailing Address (if different from above)	City, State, Zip (if different from above)	57	71
mail Address Area Code & Telephone Number (if different from above)			

DONOR OF GIFT OR BEQUEST:

Nicole Richardson Memoria	Fund % Nancy Richardson			
Name				
2211 Jessica Lane	Coralville, IA 52241			
Mailing Address	City, State, Zip Code	6/17/11	⁵ 3,407.78	
(515) 290-5029		Date of Gift or Bed	quest Amount/Value*	
Area Code & Telephone Number		Dunbus is defined a	"value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".	
richkrog@msn.com		receiving department		
Email Address (optional)				

Provide a description of the gift or bequest and purpose thereof:

This gift was given in memory of Nicole Richardson, a former Public Defender, to enable the Public Defender's Office to offer an intensive basic training free of charge to Public Defender staff and indigent defense attorneys. The training is a 2 1/2 day training covering trial practice from case analysis to jury selection.

Criteria to use this form:

Receipt of any gift or bequest that is received by any department of the state or received by the Governor on behalf of the state.

Statement of Affirmation:

I, Same 1. Langle 12 affirm that the gift or bequest reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

Sul 7. L. Signature

6/20/11 Date